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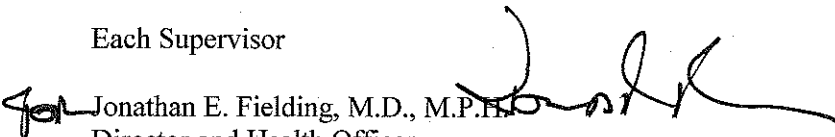
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July 3, 2012

TO: Each Supervisor

FROM:  Jonathan E. Fielding, M.D., M.P.H.
Director and Health Officer

SUBJECT: **INTERIM REPORT ON INTEGRATING ALCOHOL AND DRUG
RELATED SERVICES**

On June 6, 2012, your Board approved a motion instructing the Director of Public Health (DPH), working with the Director of Health Services (DHS) and the Director of Mental Health (DMH), in consultation with County Counsel, to report back to your Board in writing in 30 days on the extent to which contracted alcohol and drug prevention, intervention, treatment and recovery services can be better aligned with efforts by DMH and DHS to integrate their services. The report should include the following:

- a. Address the feasibility, timeline, and any necessary contractual amendments for co-locating alcohol and drug service providers at existing and planned psychiatric urgent care centers and behavioral health home sites;
- b. Describe how DPH, working with DMH and DHS, will identify potential sites that would strategically target the most patients with co-occurring disorders, decompress emergency room overcrowding, achieve economies of scale, and place patients in medical homes;
- c. Identify potential funding sources, funding gaps, and opportunities to leverage existing alcohol and drug services agreements to the maximum extent possible; and
- d. Identify a structure whereby DPH, DMH, and DHS can continue to communicate on opportunities to integrate services.

While the motion approved by your Board directed a report back within 30 days, we have found that the broad scope and complex nature of your Board's motion necessitates a longer timeframe in which to fully accomplish all the above tasks. DPH expects to complete a report to your Board fully addressing all aspects of the motion within the next 60 days. Meanwhile, the following interim report describes the approach used by DPH in collaboration with County Counsel, DHS, and DMH and progress to date towards completing the final report.

DPH immediately initiated contact with County Counsel, DHS, and DMH to establish a working group of senior leaders from each department to compile information on all current activities and to use this information to help define a plan for advancing the expansion of integrated health care, mental health, and substance use disorder services across the County. Information is being compiled on the following:

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- a. Listing of urgent care centers and behavioral health homes operated by DMH;
- b. Description and listing of co-located DHS, DMH and DPH services in the County presently in place and in planning for implementation;
- c. Listing of DHS emergency departments with descriptions substance abuse counseling/referral services available;
- d. Listing of current funding streams used for health, mental health, and substance use disorder services in Los Angeles County;
- e. Description of documented funding gaps in Los Angeles County for health, mental health, and substance abuse services; and
- f. Listing of current integrated health, mental health, and substance abuse program planning committees and working groups with descriptions of each group's specific purposes, members, and meeting schedules.

Additionally, the working group will study the current interdepartmental integration efforts that focus on persons with co-occurring conditions, such as at LAC+USC Medical Center, Olive View Medical Center, and Antelope Valley Rehabilitation Centers, to determine key programmatic elements that were critical to their success as well as the challenges that were met. These lessons learned will provide important practical guidance for the working group.

The collaborative planning working group will use the information gathered to prepare a report that will:

- a. Identify specific strategic opportunities where the combined County resources can be most efficiently invested to achieve optimum patient outcomes;
- b. Identify opportunities to leverage federal, State, and County funding from various revenue streams to provide additional resources to fill service gaps; and
- c. Establish a plan with timelines for implementing expansion of integrated services across the County for persons with co-occurring conditions and who have limited personal resources to pay for such services for themselves and/or family members.

If you have any questions or need additional information, please let me know.

JEF:wks

PH:1206:003

c: Chief Executive Officer
County Counsel
Executive Officer, Board of Supervisors
Director of Health Services
Director of Mental Health